

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 868254 RECEIPT DATE: 06 / 15 / 01
IA NUMBER: PCT/ US99 / 30761 IA FILING DATE: 12 / 22 / 99
FAMILY NAME: MORRISON DELAY WAIVED (Y/N): Y
GIVEN NAME: HUGH BOYD DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 12 / 28 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: RCA 89185 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

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STREET: PATENT DEPARTMENT
PO BOX 5312

CITY: PRINCETON

STATE/COUNTRY: NJ ZIP: 08540

EMAIL:

APPLICATION TITLES:

METHOD FOR SELECTING A PROGRAM DISPLAYED IN AN ADVERTISEMENT IN AN APPLICATION SOFTWARE PROGRAM

TAB TO LAST POSITION, PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 6997

SERIAL NUMBER 09/868,254	FILING DATE 06/15/2001 RULE	CLASS 725	GROUP ART UNIT 2611	ATTORNEY DOCKET NO. RCA 89185
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APPLICANTS

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****CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/US99/30761 12/22/1999
 WHICH CLAIMS BENEFIT OF 60/114,077 12/28/1998

**** FOREIGN APPLICATIONS *******

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 5	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

Method for selecting a program displayed in an advertisement in an application software program

FILING FEE RECEIVED 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit